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PTO/SB/31 (02-01)  
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JPWNOTICE OF APPEAL FROM THE EXAMINER TO THE  
BOARD OF PATENT APPEALS AND INTERFERENCESDocket Number (Optional)  
2916-4842.1US

## CERTIFICATE OF MAILING

In re Application of  
Hixon et al.

Application Number

10/718,852

Filed

November 20, 2003

Express Mail Label Number: EL994845025USDate of Deposit: January 17, 2006Person Making Deposit: Tim Palfreyman

For

DIE CUTTING SYSTEM, COMPONENTS THEREOF, AND  
METHODSGroup Art Unit  
3724Examiner  
S. ChoiApplicant hereby **appeals** to the Board of Patent Appeals and Interferences from the decision of  
the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$ 500.00.☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above  
is reduced by half, and the resulting fee is:\$ 250.00.☒ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have  
enclosed a duplicate copy of this sheet.☒ The Commissioner is hereby authorized to charge any **deficiency** in fees which may be required, or credit any  
overpayment to Deposit Account No. 20-1469. I have enclosed a duplicate copy of this sheet.☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.**WARNING: Information on this form may become public. Credit card information should not be included on this  
form. Provide credit card information and authorization on PTO-2038.**

I am the

☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☒ attorney or agent of record.☐ attorney or agent acting under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a).

  
Signature

Brick G. Power Reg. No. 38,581

Typed or printed name

January 17, 2006

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple  
forms if more than one signature is required, see below\*.☐ \*Total of \_\_\_\_\_ forms are submitted.Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on  
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